

**AMENDMENT TRANSMITTAL LETTER (Large Entity)**

Applicant(s): Hiroko Ohishi

Docket No.

17275

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/723,228	November 26, 2003	Rajiv J. Raj	23389	4143	9157

Invention: MEDICAL SERVICE ASSISTING SYSTEM, MEDICAL SERVICE ASSISTNG METHOD, AND PROGRAM THEREOF

**COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	4 -	5 =	0	x \$210.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- No additional fee is required for amendment.  
 Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_  
 A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.  
 The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP  
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 Any patent application processing fees under 37 CFR 1.17.  
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Signature

Dated: April 17, 2008

Katherine R. Vieyra  
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